IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE APPLICATION OF:

Applicant:

Michael D. Olsen

Serial Number:

Unassigned

Filed: **HEREWITH**

For:

CARPENTER'S LAYOUT TOOL

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below, and that I believe I am an original, first and sole inventor of the subject matter which is claimed and described in the attached specification and for which a patent is sought in this application entitled: CARPENTER'S LAYOUT TOOL.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, and acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim the benefit under Title 35 United States Code § 119(e) of the United States provisional patent application:

Application number: 60/448,340

Filing Date:

02/18/2003

I hereby appoint the following attorney to prosecute this application and transact all business in the Patent and Trademark Office and to receive all correspondence connected therewith:

> Peter Loffler (Reg. No. 35,751) P.O. Box 1001 Niceville, Florida 32588-1001 (850) 729-1520 (850) 729-3504: Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that the statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of any patent issued thereon.

Michael D. Olsen Inventor's Name

Inventor's Signature

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